

122000335792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

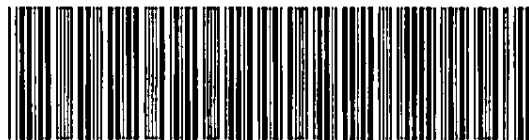
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300393795703

2022 SEP -2 AM 8:20

2022 SEP -2 AM 8:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ZUZUS PETALS LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ZAHHRAN, JAIME

Name of Person

Firm/Company

2131 SW 2ND AVE

Address

MIAMI, FL 33129

City/State and Zip Code

jzahran8879@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ZAHHRAN, JAIME

305 924-4780  
at ( )  
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- \$25.00 Filing Fee       \$30.00 Filing Fee & Certificate of Status       \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)       \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

ZUZUS PETALS LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/26/2022 and assigned Florida document number L22000335792.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

2131 SW 2ND AVE

**(Principal office address MUST BE A STREET ADDRESS)**

MIAMI, FL 33129

**Enter new mailing address, if applicable:**

2131 SW 2ND AVE

**(Mailing address MAY BE A POST OFFICE BOX)**

MIAMI, FL 33129

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

**Name of New Registered Agent:**

HAMDAN, HAMUD

**New Registered Office Address:**

1920 E HALLANDALE BEACH BLVD 613

*Enter Florida street address*

HALLANDALE BEACH

*City*

Florida 33009

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

**If Changing Registered Agent, Signature of New Registered Agent**

2022 SEP 2 AM 8:20  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	ZAHHRAN, JAIME	2131 SW 2ND AVE	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33129	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
P	ZAHHRAN, JAIME	2131 SW 2ND AVE	<input type="checkbox"/> Add
		MIAMI, FL 33129	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change





Department of State / Division of Corporations / Search Records / Search by Entity Name /

priority mail

Detail by Entity Name

Florida Limited Liability Company
ZUZUS PETALS LLC

Filing Information

Document Number L22000335792
FEI/EIN Number NONE
Date Filed 07/29/2022
State FL
Status ACTIVE

Principal Address

2131 SW 2ND AVE
MIAMI, FL 33129

Mailing Address

2131 SW 2ND AVE
MIAMI, FL 33129

Registered Agent Name & Address

HAMDAN, HAMUD
1920 E HALLANDALE BEACH BLVD
613
HALLANDALE BEACH, FL 33009

Authorized Person(s) Detail

Name & Address

Title P member

ZAHRAN, JAIME
2131 SW 2ND AVE
MIAMI, FL 33129

Annual Reports

No Annual Reports Filed

Document Images

07/29/2022 - Florida Limited Liability View image in PDF format

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L22000335792  
FILED 8:00 AM  
July 29, 2022  
Sec. Of State  
jafason

**Article I**

The name of the Limited Liability Company is:  
ZUZUS PETALS LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
2131 SW 2ND AVE  
MIAMI, FL. 33129

The mailing address of the Limited Liability Company is:  
2131 SW 2ND AVE  
MIAMI, FL. 33129

**Article III**

The name and Florida street address of the registered agent is:  
HAMUD HAMDAN  
1920 E HALLANDALE BEACH BLVD  
613  
HALLANDALE BEACH, FL. 33009

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: HAMUD HAMDAN



### Article IV

The name and address of person(s) authorized to manage LLC:

Title: P  
JAIME ZAHRAN  
2131 SW 2ND AVE  
MIAMI, FL. 33129

L22000335792  
FILED 8:00 AM  
July 29, 2022  
Sec. Of State  
jafason

Signature of member or an authorized representative

Electronic Signature: JAIME ZAHRAN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.